

ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708

Website: www.nvsos.gov

Nevada State Business License Sole Proprietor Renewal

Online renewal is also available at www.nvsos.gov

USE BLACK INK ONLY - DO NOT HIGHLIGHT

PRINT LEGIBLY OR TYPE ALL INFORMATION

ABOVE SPACE IS FOR OFFICE USE ONLY

Completing this form <u>DOES NOT</u> relieve you of any statutory or regulatory requirements relating to your business. You may be required to complete a Nevada Business Registration form with the Nevada Department of Taxation and Department of Employment, Training and Rehabilitation. Please check with these and other state/local government agencies for additional licensing requirements.

* Asterisks indicate **required** information. Incomplete forms will be rejected.

INSTRUCTIONS:

- 1. This renewal form is for the use of sole proprietors with a State Business License on file with the Secretary of State.
- 2. If you are exempt from the requirements of the State Business License pursuant to NRS 76.020 **DO NOT** use this form. Please submit a State Business License Exemption form.
- 3. Return the completed form with the \$200.00 business license fee. \$100 penalty will be added for failure to file form by license expiration date. **Refunds are not available on improperly filed renewals.**
- 4. File online at www.nvsos.gov or return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
- 5. If paying by check, make your check payable to the Secretary of State. If paying by credit card, you must complete and attach an ePayment Checklist available at www.nvsos.gov in the Forms Library under the Resources section of the Business Center.
- 6. Form must be in the possession of the Secretary of State on or before the last day of the month in which the State Business License expires. (Postmark date is not accepted as a receipt date.) Forms received after due date will be returned for additional fees and penalties.
- 7. The sole proprietor renewing the State Business License must sign the application. FORM WILL BE RETURNED IF UNSIGNED.

| Signature must be that of | | d :- tour | of many law and address and bealing and |
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| acknowledge that pursuan | t to NRS 239.330, it is a category C | ed is true, correct and complete to the best of felony to knowingly offer any false or forget be listed as the sole proprietor on the State | d instrument for filing in the Office of t |
| First Name | Middle (Optional) | Last Name | Suffix |
| | (() | | |
| X | | | |
| Signature of Sole Proprietor | Date | e | |
| Spouse, required only if to | o be listed on license | | 1 |
| First Name | Middle (Optional) | Last Name | Suffix |
| | | | |
| X Signature of Spouse | Date | | |
| | | | |
| NV Business ID # | | ired - Number on State Business License) | |
| You may add up to four bus required by local/county offi | inesses associated with this sole propces. | prietor. Entries into this section do not relieve y | ou of other business license or DBA filing |
| Business 1. 2. | | | |
| Name(s) 3. | | 4. | |
| Physical Address | | | |
| | ical Street Address | City | State Zip Code |
| Mailing Address (if different) | | | |
| (ii dillerent) PO B | Sox or Street Address | City | State Zip Code |
| Entity Phone (] |) [| | |
| Email Address | | Check here to | receive notices electronically |